

COUNTY OF FAIRFAX Department of Planning and Zoning

Zoning Evaluation Division

12055 Government Center Parkway, Suite 801 Fairfax, VA 22035 (703) 324-1290, TTY 711 www.fairfaxcounty.gov/dpz/zoning/applications

cinz C 6 170

	100 0 1 100
	APPLICATION FOR A SPECIAL PERMIT (PLEASE TYPE or PRINT IN BLACK INK) GRANTONIA
APPLICANT	NAME NEELAM RAJPAL (Fun det care) MAILING ADDRESS 1037 BRADDOCK MEWSPI SPRINGFIELD V.A. 22151 PHONE HOME() WORK() 703 256 5942 103 256 9542
	PHONE MOBILE () EMAIL 103-300-0414
PROPERTY INFORMATION	PROPERTY ADDRESS 7037 BRADDOCK MEWS PL SPRINGIFIED VA 22151 TAX MAP NO. SIZE (ACRES/SQ BT) 1,634 ALASON 71320 1002
	R-12 CRESIDENTIALIS DY/AC MASON PROPOSED ZONING IF CONCURRENT WITH REZONING APPLICATION:
	ZONING ORDINANCE SECTION
SPECIAL PERMIT REQUEST INFORMATION	8305
	HOME CHILD CARE FACILITY
AGENT/CONTACT INFORMATION	NAME
	MAILING ADDRESS SAME AS ABOVE PHONE HOME() WORK()
	PHONE MOBILE () EMAIL
MAILING	Send all correspondence to (check one): Applicant -or- Agent/Contact
The name(s) and addresses of owner(s) of record shall be provided on the affidavit form attached and made part of this application. The undersigned has the power to authorize and does hereby authorize Fairfax County staff representatives on official business to enter the subject property as necessary to process the application.	
NELIAM RAJPAL TYPE/PRINT NAME OF APPLICANT/AGENT SIGNATURE OF APPLICANT/AGENT	
	Diborallesto Subuton 4/10/
DO NOT WRITE IN	THIS SPACE < P 2013 - 029.

Date Application accepted: 43500 Application Fee Paid: \$43500